

UNITED STATES DEPARTMENT OF AGRICULTURE
FARMERS HOME ADMINISTRATION

INTEREST CREDIT AGREEMENT RENEWAL

Date: _____

Dear _____:

Your Interest Credit Agreement, which reduces the payment on your rural housing loan, expires on _____.

An interview with you has been scheduled for _____ on _____

at _____. Should you be unable to keep this appointment, it is very important that you contact our

office immediately at _____. Failure to provide us with the information to renew your interest

credit before the expiration date will cause your monthly loan payments to increase to \$ _____.

If you are receiving interest credit at the moderate income level, failure to renew your Interest Credit Agreement before expiration would mean that your income must fall to the low-income limit for the area before you again would be eligible for interest credit on your loan.

So that we can complete your Interest Credit Agreement at this meeting and compute any subsidy for which you are eligible, you must take immediate steps to provide us with the following information:

1. Complete one of the enclosed Forms FmHA 1910-5 "Request for Verification of Employment," for each employed adult (18 years of age or older) living in your household or who claims your household as their official place of residence if attending school full-time away from home. Mail or deliver these forms to the respective employers, along with the enclosed preaddressed envelopes, for verification of full-time, part-time, and seasonal employment.
2. All income from all sources must be reported. You must provide written verification of any unemployment benefits, workers' compensation, disability income, pensions, veteran's benefits, social security, child support, alimony, welfare payments, educational grants or scholarships, interest and dividends, insurance policies, annuities, regularly recurring cash or gift contributions, earned income tax credit, and armed forces pay and allowances.
3. If you are self-employed or a farmer, a detailed statement of income and expenses for the past year, including a straight line depreciation schedule of any depreciable property used in the business or farming operation.
4. Information concerning: (1) Number of dependent children under 18 years of age (excluding foster children) residing in the dwelling; (2) full-time students age 18 years or older who are members of the household; (3) elderly (age 62 years or older), or handicapped or disabled members of the household 18 years of age or older. Written proof is required for full-time student status, age of elderly, and handicap or disability status.

5. Written verification of child care expenses for children under 13 years of age necessary to enable a household member to be employed or to further his/her education.
6. Written verification of attendant care and auxiliary apparatus expenses (crutches, wheelchairs, special equipment for automobiles, etc.) for disabled/handicapped members necessary for a member of the household to be employed.
7. Written proof of anticipated yearly medical expenses not covered by insurance if you, your spouse, or co-borrower are elderly, disabled or handicapped.
8. The amount of real estate taxes and fire and hazard insurance, including flood insurance, you pay on your dwelling.

Please bring all copies of the enclosed Form FmHA 1944-A6, "Interest Credit Agreement," with you to the interview. If your spouse/co-borrower cannot attend the interview, he/she should sign the form in the space provided prior to the scheduled interview.

If you do not understand all or part of this letter please call _____ at _____ as soon as possible, so that we can help you obtain all FmHA benefits you are entitled to.

Sincerely,